

LEWIS & CLARK COLLEGE
Request for Check/Cash Reimbursement
 Date _____

_____ Amount
 _____ Cashiers Initials
 _____ Signature

CHECK REQUEST DEADLINE:

Check Requests must be submitted to the ASLC Treasurer in the Cabinet Office by **TUESDAY by 12:00PM**. Checks will be available in the **Cashier's Office** on the following **Friday at 12:00PM**. A check will not be issued unless all original itemized receipts, invoices or supporting documents are attached. Checks will not be mailed through campus mail.

STUDENT REIMBURSEMENTS: Once processed by the Treasurer and the Business Office this form will be returned to the MSC provided. Reimbursements to students will only be issued by the Cashier's Office with this check request form. Reimbursements under \$100 to students will be issued in cash.

CHECKS TO OUTSIDE CONTRACTORS (Honoraria, payments to individuals for services, performers, coaches, etc.): A W-9 form is required before the check will be processed.

Reimbursements to outside contractors will be mailed to address provided.

Payee ID Number: _____

PAY TO: (Complete address is needed for new vendors.) Only complete one side.

Student Reimbursements	Vendor Payments (must match W9)
Name:	Name:
Phone:	Address:
LC Email:	
MSC:	

PURPOSE OF PAYMENT: _____

TOTAL AMOUNT: _____

STUDENT ORGANIZATION REPRESENTED: _____

ASLC TREASURER AUTHORIZING SIGNATURE: _____

PRINTED TREASURER NAME: _____

STUDENT ACTIVITES DIRECTOR SIGNATURE: _____

ACCOUNT NUMBER: 000- _____ - _____ Debit \$ _____
 (If more than one 000- _____ - _____ \$ _____
 account is to be charged.) 000- _____ - _____ \$ _____
 000- _____ - _____ \$ _____

FOR BUSINESS OFFICE USE ONLY

By _____ Voucher Date _____ Voucher Number _____
 Cash Approval _____